CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

. o. og.c canana	
1. DATE OF REPORT 2.a. NAME OF CANDID	Lo Elect Tempse F. Brown
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE
Tommie F. Brown	
4.a. CAMPAIGN ADDRESS AND PHONE	
Street or Rural Route	State Zip Code Phone
600 N. Highland love Ave, Chatla	1009a, 1n 37404 423 622-747
4.b. CANDIDATE'S HØME ADDRESS (if different than 4.a.) Street or Rural Route City	State Zip Code Phone
OFFICE SOUGHT (include district number, if applicable) 6. N	NAME OF POLITICAL TREASURER (may be candidate)
State Representative - District 2	10 100
CATEGORY OR REPORT (Check one)	
PRE-PRIMARY □ POST-PRIMARY □ PRE-GENERAL □	POST-GENERAL ☐ SUPPLEMENTAL ☐ AMENDED ☐
	NDING DATE OF REPORTING PERIOD
1-1-97	12-31-97
9. (Check one)	
tures total \$1,000 or less for this reporting period. (Complete item b. This campaign is required to file a detailed financial disclosure be	cause contributions (including in-kind) received total more than \$1,000
and/or expenditures total more than \$1,000 for this reporting period	od.
I/we do solemnly swear or affirm that the information contained in this calcurate accounting of campaign contributions and expenditures require Financial Disclosure Act. Additionally, I/we swear or affirm that no camp benefit of the candidate or for any other nonpolitical purpose as defined signature of candidate Jan 1-98	ed to be reported by the candidate committee by the Campaign paign contributions have been expended for the personal financial
11 SWODN TO AND SUBSCIDED REFORE ME IN THE	
11. SWORN TO AND SUBSCRIBED BEFORE ME IN THE	SWORN TO AND SUBSCRIBED BEFORE ME IN THE
STATE OF lemesore	STATE OF Jemosale
THIS 31 DAY OF January 1998	THIS 31 DAY OF January 19 98
notary public	MY COMMISSION EXPIRES AUGUST 29, 1998
MY COMMISSION EXPIRES AUGUST 29, 1998	MY COMMISSION EXPIRES AUGUST 29, 1998
date commission expires	date commission expires
Notary Seal	Notary Seal
12. SUMMARY	67217
a. BALANCE ON HAND LAST REPORT	11/12/
b. TOTAL RECEIPTS THIS PERIOD	\$ 167.36
c. TOTAL DISBURSEMENTS THIS PERIOD.	\$ 110.17
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	70
e. TOTAL LOANS OUTSTANDING	\$ <u>5225</u>
f. TOTAL OBLIGATIONS OUTSTANDING	: -0-

SUMMARY PAGE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
Committee to Elect Tommie F. Brown	FROM: 1-1-97 TO: 12-31-97
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	s 200.00
b. Itemized Contributions (over \$100 from each source this period)	s 967.36
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	s 1/67.36
16. LOANS RECEIVED THIS REPORTING PERIOD	\$
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ -0-
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>1167.36</u>
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	
Contribution - Jeen Programmy Trogon \$ 100.	&
Bank Service Charges \$ 62.	50
Printing Copy \$ 41.	63
affice Supplies 5 31.	37
s	
\$	
	125 85
Total of Expenditures (\$100 or less each payee)	
b. Itemized Campaign Expenditures (Over \$100 each payee this period)	
c. Itemized Other Expenditures (Over \$100 each payee this period)	
d. TOTAL EXPENDITURES (other than loan repayments)(add 19.a., 19.b. and 19.c.)	\$71 6.79
20. LOAN REPAYMENTS MADE THIS PERIOD	s <u>-0-</u>
21. TOTAL DISBURSEMENTS (add 19.d. and 20.) (must be shown in item 12.c.)	\$ <u>716,19</u>
22. IN-KIND CONTRIBUTIONS	0 ~
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ 3,500
b. Itemized in-kind contributions (over \$100 from each source this period)	\$
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b. 23.LOANS LOANS OUTSTANDING (must be shown in item 12.e.)	s <u>3,500</u>
23.LOANS	80
LOANS OUTSTANDING (must be shown in item 12.e.)	\$ 5235
24. OBLIGATIONS	
Unitemized Obligations Outstanding (\$100 or less each)	\$0-
b. Itemized Obligations Outstanding (Over \$100 each)	\$0-
c. TOTAL OBLIGATIONS OUTSTANDING (add 24.a. and 24.b.) (must be shown i ite	m 12.f.) \$O =

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			ERING THE PERIOD			
Committee to E	last Tommie F.	Brown FROM: 1-19	7 TO: /2-31-97			
TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)						
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name	Middle Name	Contribution Received For:	Amount of Contribution			
Last Name Programization Name BLL SOUTH - Fi	nancia/ Service	☐ Primary Election ☐ General Election	Refund			
Address PO BOX 467634		Other Election (Specify)	756 -9934			
City Atlanta, GA	State A Zip Gode 31146	Date of Contribution(s) 0 - 97	Aggregate this Election 30			
First Name	Middle Name	Contribution Received For:	Amount of Contribution			
Last Name/Organization Name BELL SOUTH- Financial Services		Primary Election General Election	121.06			
10 Boy 4676 24		Other Election (Specify)	Lequina			
CAY A+lanta	6A 31146	Date of Contribution(s)	Aggregate this Election 467-36			
First Name	Middle Name	Contribution Received For:	Ame at of Contribution			
Mananigation Name		rimary Election General Election	l a			
Address		Other Election (Specify)	To the			
City	State Zip Code	Date of Contribution(s)	Aggregate this Election 15%			
First Name	Middle Name	Contribution Received For:	Amount of Contribution			
		Contribution Received For: Primary Election General Election				
Last Name/Organization Name Jennessee AFL CJO Address			Amount of Contribution			
LastName/Organization Name Jennessee AFL Clo Address Gibb Ludeel		Primary Election General Election Other Election (Specify)	Amount of Contribution			
Last Name/Organization Name Jennessee AFL CJO Address	Labor Council	Primary Election General Election	Amount of Contribution			
LastName/Organization Name Jennessee AFF C10 Address City Musdwille	Kabop Council State M Zip Code	Primary Election General Election Other Election (Specify) Date of Contribution(s) 2-15-97	Amount of Contribution 500 Aggregate this Election			
LastName/Organization Name Jennessee AFT-CJO Address JELL Ludel City Musdwille First Name	Kabop Council State M Zip Code	Date of Contribution (\$Portion Contribution (\$Portion Contribution (\$Portion Contribution (\$Portion Contribution Con	Amount of Contribution Aggregate this Election Amount of Contribution			
Last Name/Organization Name 1 ennessee AFL CJO Address JGE f., doel City Musdville First Name Last James AFL CJO	Kabop Council State M Zip Code	Primary Election General Election Other Election (Specify) Date of Contribution(s) Contribution Reserved For: General Election General Election	Amount of Contribution Aggregate this Election Amount of Contribution			
LastName/Organization Name Jennessee AFT-CJO Address JSEI f. Loce City Musdwille First Name Last Jam Address City City	State Name State Name	Date of Contribution(s) Other Election (Specify) Date of Contribution(s) Contribution Received For: Contribution General Election General Election Date of Contribution(s)	Amount of Contribution Aggregate this Election Aggregate this Election Aggregate this Election			
LastName/Organization Name Jennessee AFT-CJO Address JSEI fulce City Musdwelle First Name Address City First Name	State M Zip Code Middle Name	Date of Contribution(s) Date of Contribution(s) Contribution General Election General Election General Election General Election General Election Date of Contribution(s) Contribution Received For:	Amount of Contribution Aggregate this Election Aggregate this Election Aggregate this Election			
LastName/Organization Name Jennessee AFT-CJO Address JSEI f. Loce City Musdwille First Name Last Jam Address City City	State Name State Name	Primary Election General Election Other Election (Specify) Date of Contribution(s) Contribution Received For: Other Election General Election Other Election (Specify) Date of Contribution(s) Contribution Received For: Primary Election General Election General Election	Amount of Contribution Aggregate this Election Aggregate this Election Aggregate this Election			
LastName/Organization Name Jennessee AFT-CJO Address JSEI fulce City Musdwelle First Name Address City First Name	State Name State Name	Date of Contribution(s) Date of Contribution(s) Contribution General Election General Election General Election General Election General Election Date of Contribution(s) Contribution Received For:	Amount of Contribution Aggregate this Election Aggregate this Election Aggregate this Election			
Last Name/Organization Name Last Name	State Name State Name	Primary Election General Election Other Election (Specify) Date of Contribution(s) Contribution Received For: Other Election General Election Other Election (Specify) Date of Contribution(s) Contribution Received For: Primary Election General Election General Election	Amount of Contribution Aggregate this Election Aggregate this Election Aggregate this Election			
Last Name/Organization Name Jennessee AFC CJO Address City First Name Last Name/Organization Name Address Address	State Zip Code State Zip Code State Zip Code	Primary Election General Election Other Election (Specify) Date of Contribution(s) Contribution Received For: General Election Other Election (Specify) Date of Contribution(s) Contribution Received For: Primary Election General Election Other Election General Election Other Election (Specify)	Aggregate this Election Aggregate this Election Aggregate this Election Amount of Contribution			

ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	: 6	Got Tom	mie F. Ran FROM: 1-1-9	ERING THE PERIOD 31-91	
	Amount				
TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CAMPAIGN EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
	a particular design				
First Name	Middle Na	ame	Purpose of Expenditure	Amount of Expenditure	
Last Name Business Name Central &	611	8	17.		
Address 85 annex			District Office		
City attanta	GA	30385	Telepone acct	132-17	
First Name	Middle Na		Purpose of Expenditure	Amount of Expenditure	
Last Name Business Name Charle Depart Address 52 56 Brasi	nero	UKL	D. t. T		
Chattoneoga	State 770	37411	Printer Jones	112.02	
First Name	Middle Na	me /	Purpose of Expenditure District Office	Amount of Expenditure	
Last Name/Business Name Plus Computers, Inc			1 1	9-17-97	
Address P. Q. Buy 8798			Repairs +		
Chattanooga	TN State	37414	Compuler Repairs + posts	237.05	
First Name	Middle Nar	ne	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name	Middle Nan	ne	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name	Middle Name		Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name					
Address					
City	State	Zip Code			
TOTAL ITEMIZED CAMPAIGN EXPENDIT (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must	of this form a	re used.) item 19b. of summary.)		481.24	
-			~	-	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE OFFICE OF CANDIDATE OR COMMITTEE 3. COMPLETE THE APPROPRIATE ITEMS	lect	ITEMIZ	ZED LOAN	F. /	Service than \$100	FF	BOM:	97	NG THE PERIOD TO: 12-31-97
Complete the Following for the Source of the Loan First Name Middle Na		ر ر	(Beginning	Loan Balance of Period)	Loans Received	Pa	Loan syments		nding Loan Balance End of Period)
Address Loan Receive				-00- 453225.					
Cit Chattonoga State Zip Code Other									
U List All Endo	rsers or Guara	antors fo	or Above Loa	in (If more space	is needed	please attach	a page)		
Tomme DBrow	Middle Name	е		First Name Middle Name					ame
Last Name/Organization Name				Last Name/Organ	nization Nam	e			
Lab 3 M. Highlan	& FA	_		Address					
Chatonoo for	City Chattoneo for State Zip Cook 1404							State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name	irst Name Middle Name			First Name Middle Name					ame
Last Name/Organization Name		Last Name/Organization Name							
Address		Address							
City State Zip Code			de	City State Zip Code					
Amount Guaranteed Outstanding				Amount Guarante	ed Outstandi	ng			•
First Name	Middle Name			First Name Middle Name					
Last Name/Organization Name		Last Name/Organization Name							
Address				Address					
City	State	Zip Cod	ie	City				State	Zip Code
Amount Guaranteed Outstanding				Amount Guarantee	ed Outstandin	ng			
First Name	rst Name Middle Name		First Name Middle Name					me	
Last Name/Organization Name		Last Name/Organization Name							
Address		Address							
City	State	Zip Cod	e	City				State	Zip Code
Amount Guaranteed Outstanding				Amount Guarantee	d Outstandin	9			
Totals for all Loans (complete on last page of (Total loans received should also be shown in item 16. on s (Total loan payments should also be shown in item 20. on s (Total outstanding loan balance should also be shown in ite.)	ummary page.) ummary page.)			Outstanding Loan R		Loans Received	Loan Payme	ents	utstanding Loan Balance (End of Periodia)
A) hagail	4	Join		7	1		,000